

SRF Disbursement Request Form

Participant Information

Name:	City of West Lafayette	SRF Loan Number:	WW141079 07
DUNS Number:	04 455 2636	CCR Number:	6NKJ2
Mailing	711 West Navajo Street		
City:	West Lafayette	State:	IN
		ZIP	47906
Contact Person:	Peter L. Gray, City Controller	Contact Phone Number:	765-775-5150
Authorized Representative:	Mayor John R Dennis, or Peter L Gray	Authorized Representative Phone Number:	765-775-5100

If requesting reimbursement to the Participant by wire transfer please provide the following information:

Bank Name:		Bank Routing Number:	
Account Name:		Account Number:	

Loan Information

Description of work for which claim is being made (services, fees, type of work, etc.):	Sheraton and Fairway Knolls Lift Station Improvements		
Is any part of this claim funded by an alternate funding source?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
If yes, please identify the source and amount of the claim funded by the alternate source (OCRA, SAP, Local Funds):			\$
Is any part of this claim funded by the Indiana Brownfields Program?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Has the Participant paid the request and is now seeking reimbursement?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Is any part of this claim a result of a change order? If yes, please attach the SRF change order approval letter.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Are there Green Project Reserve components involved in this request?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
If yes, please describe:			

Loan Financial Information

Original Loan Amount:		\$	2,610,000.00
Total Amount of Previous Disbursements:		\$	2,557,882.00
Balance Available After this Disbursement:		\$	52,023.00
Amount to Contractor for this Request:		\$	95.00
Is any part of this request a partial or final release of retainage to the contractor?	<input type="checkbox"/> YES		<input checked="" type="checkbox"/> NO
Contractor Name:	Wessler Engineering	DUNS Number:	08 153 1352
Mailing address:	6219 S East Street		
City:	Indianapolis	State:	IN
		ZIP Code:	46227

Wiring Information:

Bank Name:		Bank Routing Number:	
Account Name:		Account Number:	
Retainage Amount for this Request:		\$	
Participant requests that the retainage amount be held by SRF:			<input type="checkbox"/>
Participant requests that the retainage amount be sent to the Participant via check to the mailing address listed above:			<input type="checkbox"/>
Participant requests that the retainage amount be sent to the following bank:			<input type="checkbox"/>
Bank Name:		Bank Routing Number:	
Account Name:		Account Number:	

Total Amount of this Request:	\$	95.00
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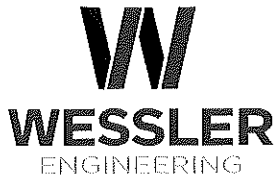
The undersigned hereby certifies this request for disbursement is, to the best of my knowledge and belief, true and accurate and made in accordance with the conditions of the project agreement, that the certified payrolls received in connection with any enclosed construction invoices are in compliance with the Davis Bacon Act/ US Department of Labor requirements of 29 CFR 5.5(a)(1).

Authorized Representative	Date:	AUG 16 2016
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For Internal Use Only:

Approved By:	Date:	GPR	\$	
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Revised on July 1, 2014



RECEIVED
AUG 04 2016
UTILITY DIRECTOR

More than a Project™

INVOICE

To: CITY OF WEST LAFAYETTE
MR. DAVID S. HENDERSON, UTILITY DIRECTOR
500 SOUTH RIVER ROAD
WEST LAFAYETTE, INDIANA 47906

Invoice Number: 29330
July 28, 2016

Project: 174515.00 WEST LAFAYETTE – SHERATON & FAIRWAY KNOLLS LIFT STATION

Manager: GARY L. RUSTON

Professional Services for the Period: 5/1/16 to 6/30/16.

PHASE: .68 RESIDENT PROJECT REPRESENTATIVE

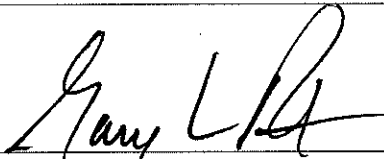
TASK: .02 NORTHSIDE REGIONAL LIFT STATION - RPR

Professional Services	Bill Hours	Bill Rate	Charge
Senior Resident Project Representative	<u>1.00</u>	\$ 95.00	\$ <u>95.00</u>
Total Labor	1.00		\$ 95.00

Reimbursables

Travel	\$ <u>0.00</u>
Total Reimbursables	\$ 0.00

Total Project Invoice Amount	\$ 95.00
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Wessler Engineering, Inc.
GARY L. RUSTON
Project Manager

Aged Receivables:				
CURRENT	30-60	60-90	90-120	OVER 120
\$95.00	\$0.00	\$0.00	\$0.00	\$0.00

All invoices are due upon receipt. A late charge of 1.5% will be added to any unpaid balance after 30 days.

Project	174515.00	W. LAF - SHERATON & FAIRWAY KNOLLS LS	Invoice	29330
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Billing Backup

Thursday, July 28, 2016

WESSLER ENGINEERING, INC.

Invoice 29330 Dated 7/28/2016

3:59:37 PM

Project	174515.00	W. LAFAYETTE - SHERATON & FAIRWAY KNOLLS LIFT STATION
Phase	00068	CONSTRUCTION OBSERVATION
Task	000002	NORTHSIDE REGIONAL LS RPR

Professional Services

			Bill Hours	Bill Rate	Charge
Sr. Resident Project Representative					
528	Sr. Resident Project Representative				
	McGUIRE, SAMUEL	5/17/2016	1.00	95.00	95.00
	Inspection				
	Totals		1.00		95.00
	Total Labor				95.00
				Total this Task	\$95.00
				Total this Phase	\$95.00
				Total this Project	\$95.00
				Total this Report	\$95.00